

Submit 1 Copy To Appropriate District
Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
October 13, 2009

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)		WELL API NO. 30-025-11154
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>Injection</u>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/> <u>Fed</u>
2. Name of Operator <u>McDonnold Operating Inc.</u>		6. State Oil & Gas Lease No.
3. Address of Operator <u>505 W. Big Spring Suite 204 Midland TX 79701</u>		7. Lease Name or Unit Agreement Name <u>Langlie Jack Unit</u>
4. Well Location Unit Letter <u>I</u> : <u>1980</u> feet from the <u>S</u> line and <u>660</u> feet from the <u>E</u> line Section <u>20</u> Township <u>24S</u> Range <u>37E</u> NMPM <u>Lea</u> County <u>NM</u>		8. Well Number <u>12</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <u>14372</u>
		10. Pool name or Wildcat <u>Langlie Mattix Trvs QNEB</u>

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>MIT</u> <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

6-9-11 Performed MIT for 35 mins. Pressure held @ 340#.
Chart Signed by Buddy Hill.

Accepted for Record Only

ECG 6-29-2011

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Craig M. McDonnold TITLE President

DATE

6-16-11

Type or print name

Craig M. McDonnold

E-mail address:

PHONE:

432-682-3499

For State Use Only

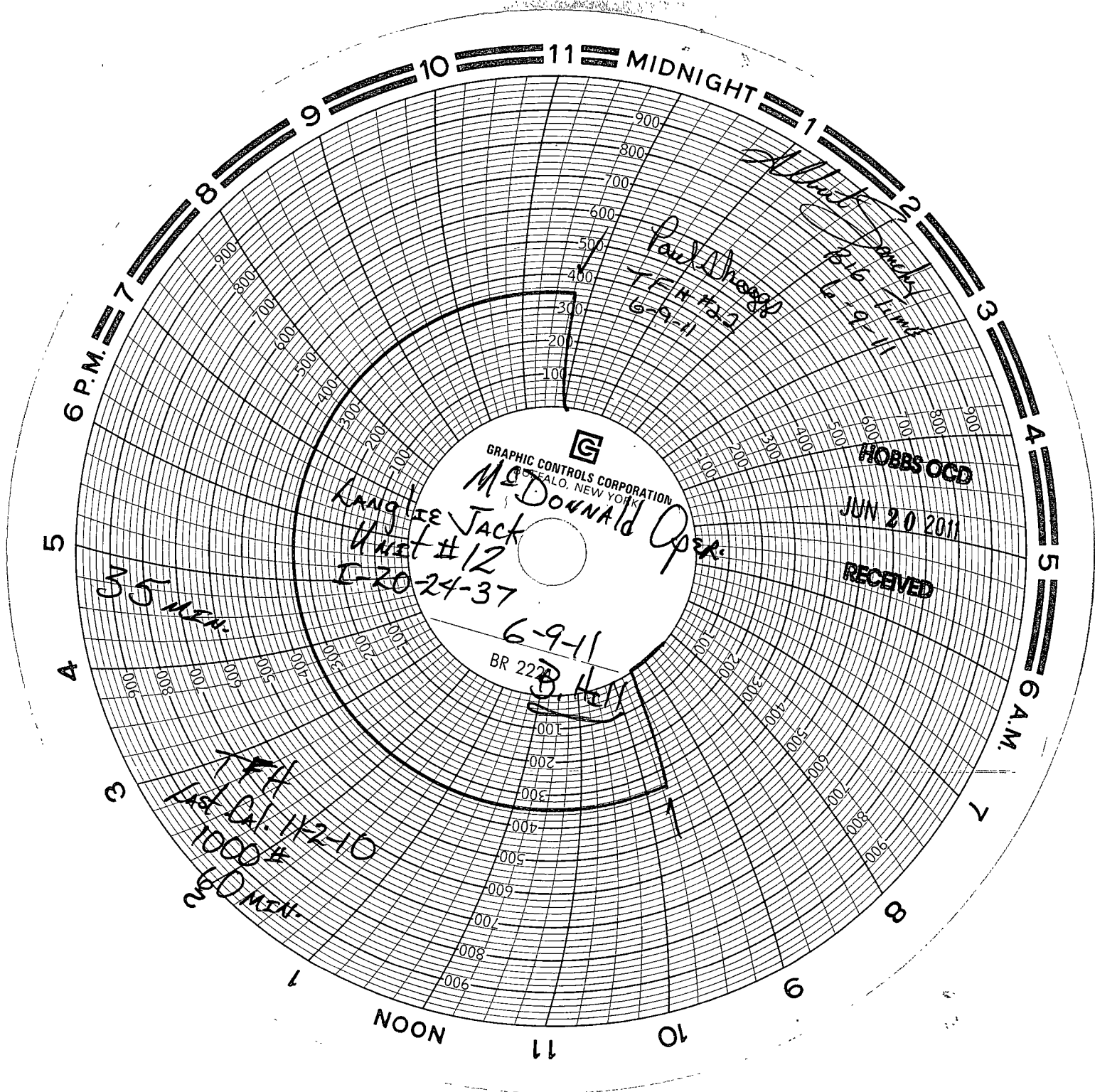
APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):

JUL 01 2011



GRAPHIC CONTROLS CORPORATION
ROCHESTER, NEW YORK

Langley Jack
Unit #12
E-20-24-37

6-9-11

BR 222

Paul Shopp
T.E.H. #12
6-9-11

HOBBS OGD

JUN 20 2011

RECEIVED

55 MIN.

T.E.H.
Unit #12-10
1000#
260 MIN.